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TO:

MS Issue Fee

FAX NO.:

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FROM:

Jeffrey S. Abel

Reg. No.: 36,079

**RE U.S. App. No.:** 10/669,141, filed September 23, 2003

Applicant(s): Milan Kokta, et al.

Atty Dkt No.: 1035-BI4282

Title: SPINEL ARTICLES AND METHODS FOR FORMING SAME

NO. OF PAGES (including Cover Sheet): 6

## **MESSAGE:**

Attached please find:

🔀 Transmittal Form (1 pg)

X Fee Transmittal Form (1 pg)

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Rule 312 Communication w/Attachment (2 pgs)

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Fee Transmittal Form Fee Attached  Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement  Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s)  Licensing-related Pa  Petition Petition to Convert to Provisional Applicati Power of Attorney, Formulael Disclaimer Request for Refund CD, Number of CD(s Landscape Ta  Remarks  CUSTOMER NO	o a on Revocation Indence Address  B) L ble on CD	After A Appeal of Appeal Appeal (Appeal Proprie Status Other is below) Part-B Issue	Enclosure(s) (p	on to Berences on to Terences on to Terences on on on one	pard c c c c c dentify c dentify
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I hereby certify that this correspondence is to sufficient postage as first class mail in an entitle date shown below:	ERTIFICATE OF TRAN	he USPTO or depo	sited with the Un	ited States Po Nexandria, VA	stal Ser 22313	rvice with -1450 on
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This collection of Information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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TL&A 512-327-5452 PTO/SB/17 (12-04v2) FER 1 5 2006 Approved for use through 07/31/2006, OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE nd to a collection of information unless it displays a valid OMB control number eduction Act of 1995 Effective on 12/08/2004. Complete if Known Besipping the Consolidated Appropriations Act. 2005 (H.R. 4818). 10/669,141 Application Number TRANSMITTAL Filing Date September 23, 2003 For FY 2005 First Named Inventor Milan Kokta Examiner Name Stephen J. Stein Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1775 TOTAL AMOUNT OF PAYMENT (\$) 1,706.00 1035-BI4282 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card None Money Order Other (please identify): Deposit Account Name: TOLER, LARSON & ABEL, LLP Deposit Account Deposit Account Number: 50-2469 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES** Small Entity **Small Entity** Small Entity **Application Type** Fee (\$) Fee (\$) Fee (\$) Fees Pald (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 200 100 150 500 250 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 ደበ Reissue 300 150 500 250 600 300 **Provisional** 200 100 0 0 O 0 Small Entity 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description 50 25 Each claim over 20 (including Reissues) 200 100 Each independent claim over 3 (including Reissucs) 360 180 Multiple dependent claims Multiple Dependent Claims **Total Claims** Extra Claims Fee (\$) Fee Paid (\$) Fee (\$) Fee Paid (\$) - 20 or HP = HP = highest number of total claims paid for, if greater than 20. Extra Claims Fee Paid (\$) Fee (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) Total Sheets Extra Sheets - 100 = \_ (round up to a whole number) 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) 1,706.00 Other (e.g., late filing surcharge): Issue Fee/Publication Fee/Extra Copies Fee

SUBMITTED BY		
Signature //////	Registration No. 36,079 (Attorney/Agent)	Telephone 512-327-5515
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